

# COPY 4/10

Attorney Docket No. A2000-700810

## REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

**Address to:**  
**OFFICE OF PETITIONS**  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

<i>Application Number</i>	10/038,106
<i>Confirmation Number</i>	5385
<i>Filing Date</i>	January 2, 2002
<i>First Named Inventor</i>	Neil Rasmussen et al.
<i>Group Art Unit</i>	2831
<i>Examiner Name</i>	A. Estrada

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

**1. Submission required under 37 C.F.R. § 1.114**

a. Previously submitted

- i.  Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on \_\_\_\_\_. (Any unentered amendment(s) referred to above will be entered.)
- ii.  Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_.
- iii.  Other:

b. Enclosed is/are:

- i.  Amendment/Reply
- ii.  Affidavit(s)/Declaration(s)
- iii.  Information Disclosure Statement (IDS) (3 pgs.)
- iv.  Other: PTO Form 1449 (in duplicate - 1 pg.); Petition to Withdraw from Issue (2 pgs.)

**2. Miscellaneous**

- a.  Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of \_\_\_\_ months. (Period of suspension shall not exceed 3 months) and the Fee of \$130.00 under 37 C.F.R. § 1.17(i) is enclosed.

- b.  Other:

**3. Fees - The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed.**

- a.  Enclosed is a check in the amount of \$\_\_\_\_\_.00 which covers:

- i.  RCE fee required under 37 C.F.R. § 1.17(e)
- ii.  Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)
- iii.  Other: Petition Fee of Withdrawal from Issue under 37 C.F.R. § 1.17(h).

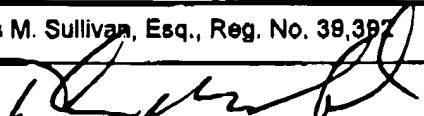
4. If the filing of this RCE necessitates an extension of time under 37 CFR §1.136(a), the applicant hereby requests such extension of time.

5. If there is no check enclosed, or if the amount of the enclosed check in this RCE is incorrect, the Director is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account No. 50/2762, Ref. No. A2000-700810.

**COPY S/10****6. CORRESPONDENCE ADDRESS****Customer Number: 37462****OR****6. CORRESPONDENCE ADDRESS**

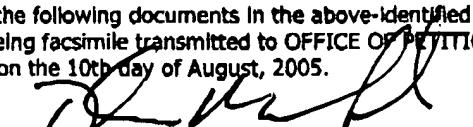
ATTORNEY'S NAME	Thomas M. Sullivan, Reg. No. 39,392				
FIRM NAME	LOWRIE, LANDO & ANASTASI, LLP				
ADDRESS	Riverfront Office Park, One Main Street				
CITY	Cambridge	STATE	MA	ZIP	02142
COUNTRY	USA	TELEPHONE	(617) 395-7000	FAX	(617) 395-7070

**7. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

NAME	Thomas M. Sullivan, Esq., Reg. No. 39,392
SIGNATURE	
DATE	August 10, 2005

**CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. 51.8(b)**

The undersigned hereby certifies that a copy of the following documents in the above-identified patent application (total - 81 pages including cover sheet) are being facsimile transmitted to OFFICE OF PETITIONS, Commissioner for Patents, at the number 571-273-0025, on the 10th day of August, 2005.



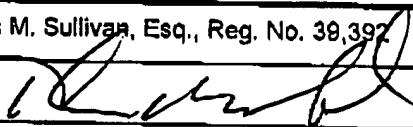
Thomas M. Sullivan, Esq. (Reg. No. 39,392)

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**6. CORRESPONDENCE ADDRESS****Customer Number: 37462****OR****6. CORRESPONDENCE ADDRESS**

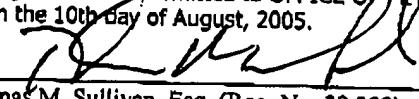
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NAME	Thomas M. Sullivan, Esq., Reg. No. 39,392
SIGNATURE	
DATE	August 10, 2005

**CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. §1.8(a)**

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Thomas M. Sullivan, Esq. (Reg. No. 39,392)

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